

UNITED STATES HOUSE OF REPRESENTATIVES  
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 1 of 4  
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER

2011 MAY 16 PM 12:39

MC

Robert William Bishop  
(Full Name)

202-225-0453  
(Daytime Telephone)

OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES  
**HAND DELIVERED**

(Office Use Only)

Filer  
Status

☒ Member of the U.S.  
House of Representatives

State: UT  
District: 01

☐ Officer Or  
Employee

Employing Office:

Report  
Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

**A \$200 penalty shall  
be assessed against  
anyone who files  
more than 30 days  
late.**

**PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS**

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

**EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS**

<b>Trusts--</b>	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of each a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Exemptions--</b>	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

**SCHEDULE I - EARNED INCOME**

Name Robert William Bishop

Page 2 of 4

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Utah State Retirement System	Educator Pension	\$29,251

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert William Bishop

Page 3 of 4

## BLOCK A

### Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned" income during the year.

Provide complete names of stocks and mutual funds (do not use ticker symbols.)

For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting threshold. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.

For rental or other real property held for investment, provide a complete address.

For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.

Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or

## BLOCK B

### Year-End Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."

## BLOCK C

### Type of Income

Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.

## BLOCK D

### Amount of Income

For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.

## BLOCK E

### Transaction

Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

JT	America First CU Accounts Box 9199, Ogden, UT 84409	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
JT	Invesco - AIM Investments Large Cap Growth Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	

**SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS**

Name Robert William Bishop

Page 4 of 4

Identify the source and list travel itinerary, dates, and nature of expense provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
Heritage Foundation	Jan. 14-15	DC - Charlottesville - DC	Y	Y	N	0
US Assn of Former Members of Congress	May 13-14	DC - St Louis - SLC	Y	Y	N	0
German Marshall Fund of the US	Jul. 16-18	DC - Dayton - SLC	Y	Y	N	0

**UNITED STATES HOUSE OF REPRESENTATIVES  
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT**

**FORM A** Page 1 of 8  
For use by Members, officers, and employees

**HAND DELIVERED**

James David Matheson  
(Full Name)

202-225-3011  
(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER

2011 MAY 12 PM 3:00

(Office Use Only)

**Filer  
Status**

☒ Member of the U.S.  
House of Representatives

State: UT  
District: 02

☐ Officer Or  
Employee

Employing Office:

**Report  
Type**

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

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anyone who files  
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late.

**PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS**

<p>I. Did you or your spouse have "earned" income (a.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule I.</p>	<p>VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VI.</p>
<p>II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule II.</p>	<p>VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VII.</p>
<p>III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule III.</p>	<p>VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VIII.</p>
<p>IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule IV.</p>	<p>IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IX.</p>
<p>V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule V.</p>	<p>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</p>

**EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS**

<b>Trusts--</b>	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Exemptions--</b>	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

**SCHEDULE I - EARNED INCOME**

Name James Devid Matheson

Page 2 of 8

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
University of Utah	Spouse Salary	N/A

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name James David Matheson

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BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
<b>Asset and/or Income Source</b> Identify (e) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.  Provide complete names of stocks and mutual funds (do not use ticker symbols.)  For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.  For rental or other real property held for investment, provide a complete address.  For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.  Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and deposits totaling \$5,000 or less in a personal checking or	<b>Year-End Value of Asset</b>  at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	<b>Type of Income</b>  Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	<b>Amount of Income</b>  For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	<b>Transaction</b>  Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
Alpine Dynamic Dividend Fund	\$1,001 - \$15,000	DIVIDENDS	\$1,001 - \$2,500	P
Baron Partners Mutual Fund	\$1,001 - \$15,000	None	NONE	
Coin Collection	\$1,001 - \$15,000	None	NONE	
Equitable Variable Life Insurance Mutual Fund: AXA Moderate Allocation	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	P
Equitable Variable Life Insurance Mutual Fund: AXA Moderate Plus Allocation	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	P
Fidelity Asset Manager 50%	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	P

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name James David Matheson

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	Fidelity Balanced Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	P
	Fidelity Cash Reserves	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
	Fidelity Export and Multinational Fund	\$50,001 - \$100,000	DIVIDENDS	\$1 - \$200	PS(part)
	Fidelity Freedom Fund 2035	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	P
	Fidelity Low Priced Stock Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	PS(part)
	Fidelity Small Cap Discovery Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
	Fidelity Spartan US Equity Fund	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	PS(part)
	Fidelity UNIQUE 2015 Portfolio	\$50,001 - \$100,000	None	NONE	P
	Fidelity Value Discovery Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
	Garmin Stock	\$1,001 - \$15,000	None	NONE	
	Northeast Investors Trust	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	P
	Qualcomm Stock	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	P
	TIAA CREF Lifecycle 2035	\$50,001 - \$100,000	None	NONE	PS(part)
	TIAA CREF Real Estate	\$15,001 - \$50,000	None	NONE	P



**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name James David Matheson

Page 5 of 8

	Vanguard Emerging Markets Index	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	P
	Vanguard Short Term Treasury Fund	\$1,001 - \$15,000	None	NONE	P
	Vanguard Small Cap Stock Index	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
	Wasatch Micro Cap Fund	\$15,001 - \$50,000	None	NONE	P
	Zions Bank Checking Account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	

# SCHEDULE IV - TRANSACTIONS

Name James David Matheson

Page 6 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Alpine Dynamic Dividend Fund	P	N/A	Various Dividend Reinvestments	\$1,001 - \$15,000
	Equitable Variable Life Insurance Mutual Fund: AXA Moderate Allocation Fund	P	N/A	Various Dividend Reinvestments	\$1,001 - \$15,000
	Equitable Variable Life Insurance Mutual Fund: AXA Moderate Plus Allocation Fund	P	N/A	Various Dividend Reinvestments	\$1,001 - \$15,000
	Fidelity Asset Manager 50%	P	N/A	Semi-monthly purchases plus dividend reinvestment	\$1,001 - \$15,000
	Fidelity Export and Multinational Fund	P	N/A	Semi-monthly purchases plus dividend reinvestment	\$1,001 - \$15,000
	Fidelity Export and Multinational Fund	S(part)	No	12-28-10	\$1,001 - \$15,000
	Fidelity Freedom Fund 2035	P	N/A	Semi-monthly purchases plus dividend reinvestment	\$1,001 - \$15,000
	Fidelity Low Priced Stock Fund	S(part)	No	12-28-10	\$1,001 - \$15,000

# SCHEDULE IV - TRANSACTIONS

Name James David Matheson

Page 7 of 8

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SP, DC, JT	Asset	Type of Transaction	Capital Gain In Excess of \$200?	Date	Amount of Transaction
	Fidelity Small Cap Discovery Fund	P	N/A	12-28-10	\$1,001 - \$15,000
	Fidelity Spartan US Equity Fund	S(part)	No	12-28-10	\$1,001 - \$15,000
	Fidelity Spartan US Equity Fund	P	N/A	Semi-monthly purchases plus dividend reinvestment	\$1,001 - \$15,000
	Fidelity UNIQUE 2015 Portfolio	P	N/A	Various Purchases	\$1,001 - \$15,000
	Fidelity Value Discovery Fund	P	N/A	Semi-monthly purchases plus dividend reinvestment	\$1,001 - \$15,000
	Qualcomm Stock	P	N/A	Various Dividend Reinvestments	\$1,001 - \$15,000
	TIAA CREF Lifecycle 2035	S(part)	No	12-28-10	\$1,001 - \$15,000
	TIAA CREF Lifecycle 2035	P	N/A	Semi-monthly purchases	\$1,001 - \$15,000
	TIAA CREF Real Estate	P	N/A	Semi-monthly purchases	\$1,001 - \$15,000
	Vanguard Short Term Treasury Fund	P	N/A	12-28-10	\$1,001 - \$15,000

# SCHEDULE IV - TRANSACTIONS

Name James Devid Metheson

Page 8 of 8

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SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Wasatch Micro Cap Fund	P	N/A	Monthly purchases	\$1,001 - \$15,000

**UNITED STATES HOUSE OF REPRESENTATIVES**  
**CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT**

**FORM A** Page 1 of 5  
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER

2011 MAY 12 AM 10:09

JASON E. CHAFFETZ

801-404-1300

OFFICE OF CLERK  
U.S. HOUSE OF REPRESENTATIVES

(Full Name)

(Daytime Telephone)

**HAND DELIVERED**

**Filer Status**

☒ Member of the U.S. House of Representatives  
State: UT  
District: 03

☐ Officer Or Employee  
Employing Office: \_\_\_\_\_

**Report Type**

☒ Annual (May 15) ☐ Amendment ☐ Termination

Termination Date: \_\_\_\_\_

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<p><b>II.</b> Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule II.</p>	<p><b>VII.</b> Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule VII.</p>
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<p><b>V.</b> Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule V.</p>	<p><b>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</b></p>

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**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name JASON E. CHAFFETZ

Page 2 of 5

BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
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JT	IRA-Delta Petroleum Corporation	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	IRA-Federated Equity FDS Capital Appreciation Fund CL A	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	IRA-Wells Fargo Advantage FDS-Asset Allocation FDS Class B	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	IRA-Wells Fargo Bank Cash	\$1 - \$1,000	INTEREST	\$1 - \$200	
JT	Marriott Vacation Club	\$15,001 - \$50,000	None	NONE	
JT	Personal Residence: 315 Westfield Circle, Alpine, UT	\$500,001 - \$1,000,000	None	NONE	

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name JASON E. CHAFFETZ

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DC1	The Investment Company of America-529A	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
DC2	The Investment Company of America-529A	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
DC3	The Investment Company of America-529A	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	Utah State Retirement-Long Horizon Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Wells Fargo Bank, Alpine, UT	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC1	Zions Bank, Alpine, UT	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC2	Zions Bank, Alpine, UT	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC3	Zions Bank, Alpine, UT	\$1 - \$1,000	INTEREST	\$1 - \$200	

**SCHEDULE V - LIABILITIES**

Name JASON E. CHAFFETZ

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JT	PNC Bank, Dayton, OH	February 2009	Mortgage on 315 Westfield Circle, Alpine, UT	\$250,001 - \$500,000



**SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS**

Name JASON E. CHAFFETZ

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
Lexington Institute	November 11, 2010 to November 14, 2010	Washington, DC/Salt Lake City, UT-Havana, Cuba- Washington, DC/Salt Lake City, UT	Y	Y	Y	None
American Israel Education Foundation	July 5, 2010 to July 12, 2010	Salt Lake City, UT-Tel Aviv, Israel-Salt Lake City, UT	Y	Y	Y	None
The Aspen Institute Congressional Program	May 31, 2010 to June 6, 2010	Salt Lake City, UT-Tunis, Tunisia-Salt Lake City, UT	Y	Y	Y	None